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From: Ising, Amy [<mailto:ising@ad.unc.edu>]
Sent: Friday, March 25, 2011 2:09 PM
To: Massey, Anita
Subject: REF# 201101-01 comments

Dear Ms. Massey,

Thank you for the opportunity to provide comments on North Carolina's Statewide Health Information Exchange Services.

My name is Amy Ising and I am the Program Director for NC DETECT (North Carolina Disease Event Tracking and Epidemiologic Collection Tool).

<http://www.ncdetect.org>

Email address: amy_ising@med.unc.edu

NC DETECT is North Carolina's statewide syndromic surveillance system that is developed and maintained through a partnership between the North Carolina Division of Public Health and the Carolina Center for Health Informatics in the Department of Emergency Medicine at the University of North Carolina at Chapel Hill. NC DETECT currently receives emergency department data from 113/114 civilian hospitals via the North Carolina Hospital Association's NCHESS program. The NC DETECT Web application provides users at all levels (local, regional and state public health as well as hospital users) with a variety of public health surveillance reports updated in near real time.

Syndromic surveillance is included as one of the three public health menu reporting options in the Final Rule and, as such, should be considered as a core service for the statewide HIE.

RE: 3.4 Submit information for public health and quality improvement - Disease surveillance reporting to local public health and state agencies.

Section 3.4 is referring specifically to public health syndromic surveillance, i.e. anonymized chief complaint data. As such, the authors may want to re-title this section "public health syndromic surveillance" rather than "disease surveillance reporting" for clarification and to distinguish it from notifiable disease reporting. The North Carolina Disease Event Tracking and Epidemiologic Collection Tool (NC DETECT) is North Carolina's statewide syndromic surveillance system that serves both local and state public health agencies. Hospitals and providers, therefore, can "report" to both local and state public health by transmitting their de-identified data to NC DETECT (<http://www.ncdetect.org>). National recommendations pertaining to syndromic surveillance (including recommended data elements) are available at http://www.syndromic.org/uploads/files/ISDSRecommendation_FINAL.pdf

Based on the above comments, suggested wording for Section 3.4 is as follows:

HIE service: 3.4 Public health syndromic surveillance reporting to local public health and state agencies, via NC DETECT, NC's statewide syndromic surveillance system.

Description: A provider or hospital sends (i.e. reports) anonymized chief complaint data, including a problem list, to NC DETECT, NC's syndromic surveillance program.

1. Hospital EHR systems collect data on patient chief complaints as part of regular provision of care.
2. The provider or hospital has made the determination that it is clinically and legally appropriate to send the chief complaint data to Public Health.
3. Patient chief complaint data are communicated to NC DETECT on a pre-determined schedule, at least once every 24 hours.

Best regards,
Amy

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